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(F	Requestor's Name)	
····	Address)	
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(0	City/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(E	Business Entity Nami	e)
([	Document Number)	
*Copies	Certificale	s of Stalus
al Instructions to Fi	ling Officer:	
		J. HORNE MAY - 4 2023

Office Use Only



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2023 MAY "4 PK 12: "

2023 HAY -4 PH 12: 36

## **COVER LETTER**

TO: Registration Sec Division of Corp			
HOOKAHS	SPORTS BAR 2 LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of A	rmendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	JOSE RAMIREZ		
	<del></del>	Name of Person	
	HOOKAHS SPORTS BAI	R 2 LLC	
		Firm Company	
	4925 S ORANGE BLOSS	OM TRAIL	
		Address	<del>711. · · · · · · · · · · · · · · · · · · </del>
	ORLANDO, FLORIDA 3.	2811	
		City State and Zip Code	
	Josebaca:	3200 ya hav .com	A. Saturana
For further information co	neerning this matter, please c		
Jose Baco	<b>ે</b>	at (301 ) 281114	
Jose Baca Name of Person		Area Code Daytin	e Telephone Number
Enclosed is a check for the	e following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	LI \$60,00 Filing Fee. Certificate of Status & Certified Copy calditional copy is enclosed)
Mailing Address Registration S		<u>Street Address:</u> Registration Sc	ction
Division of Co	orporations	Division of Cor	porations
P.O. Box 6327 Tallahassee, F		The Centre of T 2415 N. Monro	Callahassee se Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



HOOKAHS SPORTS BAR 2 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company of	were filed on <u>10 03 2019</u>	and assigned
Florida document number 1.19000249163		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
EL BARQUITO SPORTS BAR LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ry Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a	ddress on our records, enter the	name of the new registered
agent and/or the new registered office address here:	·	<del>-</del>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
N. B. L. A.	Chy	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p		
accept the obligations of my position as registered agent as p		

being filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Remove
			Z Change
		·	= Add
			Remove
		<del></del>	Change
			□Remove
			\ \_ \_ Change
	<u></u>		
			🗀 Remove
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ffective date, if other to an effective date is listed, the solution of the date inserted document's effective date	e date must be specific in this block does n	and cannot be pricot meet the appli	cable statutory till	more than 90 days afte	ional) r filing.) Pursuant to 60 is date will not be lis	5,020° ted as
record specifies a delayed Lis filed.	Leffective date, but	not an effective	time, at 12:01 a.m	, on the earlier of: (	b) The 90th day afte	er the
dated MAY IST		2023	<u></u> . ·			
		_		e of a member		

Filing Fee: \$25.00